#### Affidavit and Revenue Certification

OFFICIAL FILE COPY

(318) 226-8975

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NORTHWEST LOUISIANA CHAPTER (Xerox necessary ENTITY NAME from this Sickle Cell Disease Association of America, Inc. copy and PLACE BACK in FILE) Caddo Parish Shreveport (City), Louisiana ANNUAL SWORN FINANCIAL STATEMENTS AND CERTIFICATION OF REVENUES \$50,000 OR LESS (if applicable) The annual sworn financial statements are required by Louisiana Revised Statute 24:514 to be filed with the Legislative Auditor within 90 days after the close of the fiscal year. The certification of revenues \$50,000 or less, if applicable, is required by Louisiana Revised Statute 24:513(I)(1)(c)(i). Janie L. Samuels Personally came and appeared before the undersigned authority, \_ (name), who, duly sworn, deposes and says that the financial Dorothy Holt\_ statements herewith given present fairly the financial position of Sickle Cell Disease Association of America, Inc., NW LA Ch (entity name) as of September 12, 2003 and the results of operations for the year then ended, in accordance with the basis of accounting described within the accompanying financial statements. (Complete if applicable) In addition, Janie Samuels & Dorothy Holt \_\_, (name), who, duly sworn, deposes and says that NCDAA, Inc., NW, LA Chapter (entity name) received \$50,000 or less in revenues and other sources for the year ended <u>June 30</u>, 2003, and accordingly, is not required to have an audit for the previously mentioned year. Signature Sworn to and subscribed before me this / Officer Name Janie L. Samuels Title Treasurer Address 2200 Milam Street Under provisions of state law, this report is a public Shreveport, LA 71107

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Release Date 10-1-03

the entity and other appropriate public officials. The

report is available for public inspection at the Baton

Cauge office of the Legislative Auditor and, where

appropriate, at the office of the parish clerk of court.

document. A copy of the report has been submitted to none No.



# SICKLE CELL DISEASE ASSOCIATION OF AMERICA, INC. NORTHWEST LOUISIANA CHAPTER

2200 Milam Street-Room 9 Shreveport, Louisiana 71103 (318) 226-8975 Fax (318) 226-8050 RECEIVED LEGISLE FOUNTOR

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July 15, 2003

### Contract CFMS # 539351, DHH # 17377

## FINANCIAL REPORT July 1, 2002 - June 30, 2003

This budget reflects the yearly financial report compiled and sent to the State of Louisiana Department of Health and Hospitals for the Grant received for the period indicated above.

Balance Brought Forward

State Grant \$ 49,500.00

Expenditures:

Personnel Service Payroll (4 part-time employees)	38,500.00
Related Benefits	2,983.00
Travel (In state)	963.31
Supplies	3,019.58
Professional Services	1,200.00
Capital Assets	2,018.35
Administrative	817.00

#### TOTAL EXPENDITURES

\* 49,501.24

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\*All overage (one dollar and twenty-four cents)
\$1.24 will be taken care of by the general account

ENDING BALANCE

-0-

Submitted by:

Lillie J. Bradford, Executive Director